APPLICATION TOR

RECREATIONAL VEHICLE

Bayfield County Planning and Zoning Departmer P.O. Box 58

Washburn, WI 54891 Phone – (715) 373-6138 117 East Sixth Street

JUN 28-2012

Date _

Fee Paid

Application No.

Zoning District/Lakes Class

Office Use:

Bayfield Co. Zoning Dope.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT

Changes in plans must be approved by the Zoning Department

Mailing Address

Telephone

Property Owner

Additional Legal Description: Accurate Legal Description involved in this request: 026 Page Lot (5 1/4 of Section ろ<u>分</u>のf Deeds Z Block 100 Subdivision Parcel I.D. Township 8 T 1000 04014250018010032210000 Robert N. Range Zoning District: Written Authorization Attached: Agent: of RV placement. Property Address BARTETT LAND W. Town of Acreage 200 erbsier Copy of Tax Statement CORPE たアア るるか ATTACH ح Yes (CORPCE 24845 No (

FAILURE TO OBTAIN A PERMIT <u>or</u> PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES

RV:

New

习

Replacement 🗆

Vin#

Is your RV in a Shoreland Zone?

Yes

×

If Yes,

Distance from Shoreline: 75' or greater ...

Volume₋

Gov*t Lot

1/4 of

Make of RV:

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Jarvery

Model of RV:

卫

)Hee,

ダンプング

75' to 40'

less than 40' ...

APPLICANT -- PLEASE COMPLETE REVERSE SIDE

386. // mr	ecars of Door	Condition: RV m	Variance (B.O.A.) #	HIEST AT AN	Inspection Recor	Reason for Denial:	Issuance Date 7-11-12	Permit Issued:	
		be placed up	#	May the issues as colorhoods by Do-	Inspection Record: Lacktood Bu will PUNEMENT & BU ONLINE MENTERS ANTENS				
Inspector	Signed K	mths from issuance da		DC-	PULLEMENT & PER		Permit Number 12-0558	Sanitary Number	For Office Use Only
				Date of Inspection $7 \cdot \ell - l \nu$	CONTRA MALABORITO		Remit Denied (Dat	umber	ny
Date of Approval	767	Must be removed by: Nov. 7,2012		7-6-12	Arrows Powert		ied (Date)	Date	

and use frontage road as a guideline, and indicate North (N) on plot plan

the RV (Recreation Vehicle) location

Detailed Plot Plan is Neccessary IMPORTANT

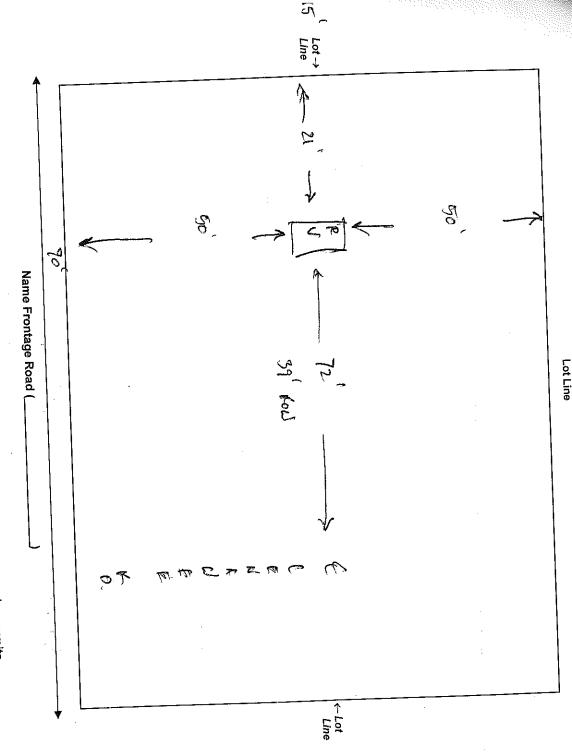
Show dimensions in feet on the following:

- a RV from centerline of road(s).
- Ģ RV from right-of-way line

ဂ

RV from property lines

- ٩ RV from lake, river, stream or pond
- Ф **RV from Privy**



NOTICE: The local town, village, city, state or federal agencies may also require permits.

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it true, correct and complete. I (we) acknowledge that I (we) am (are) providing whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent Address to send permit 5

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

JUL 03 2012 ៤បារ

Bayfield Co. Zoning Dept.

Amount Paid: \$1200.00.5 Date: 7-11-16 Application No.: 12-0833 Zoning District (RB/ -37 BS

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condition: A clittory alleway late (onc) busin the leaving suffixed to use adjecting the	~€
Mitigation Plan Required; Yes □ No 💆 Variance (B.O.A.)#	
Moderate was the contract By DOC	As es
Inspection Record: (HORSE) STOCKE LOUTING & STRUCK AS REMISERATED BY OWNER, LITTER ROPLINGUE STRIPE	
Denial:	20 C
11 now State Sanitary Number 12-715	O .
Copy of Tax Statement or See Notice on Back (If you recently purchased the property Attach a Copy of Recorded Deed)	₩
Address to send permit 612 West 4th Street Walhburn, WI 59891 ATTACH	Addre
er or Authorized Agent (Signature)	Owner or
(we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access by the above described property at any reasonable time for the purpose of inspection.	to issu
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN <u>PENALTIES</u> I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I	I (we)
Residential Other (explain)	□Re
Residential Accessory Building Addition (explain) External Improvements to Principal Building (explain)	□ 20 24
Residential Addition / Alteration (explain)	, _П
Residence sq. ft Garage sq. ft Commercial Other (explain)	Ŗ
nce w/attached garage (# c	□ **
Deck(2) sq. ft	D 3
Residence w/deck-porch (# of bedrooms) 3 bedrooms	Q
	_Z p
Type of Septic/Sanitary System	□ S
harket Value 400,000 Square Footage 12.90 Sanitary: New X Existing No. X	Structure: Fair Mark
ucture in a Shoreland Zone? Yes 🔟 No 🗍 If yes. Distance from Shoreline: greater than 75' 🕽	ls you
Telephone 613-8よ3-3779 (Home) 613-303-7643 (Work) Written Authorization Attached: Yes 図 No 🗍	Telepl
Ketchrum (
10	Addre
	Prope
.5 Page ,363 of Deeds Parcel I.D. 04-014-2-51-07-26-1 05-004-4000	Volume
4 Lot 4 Block Subdivision CSM# 857 Acreage 1,76	Gov't Lot
Legal Description $\frac{36}{14}$ of $\frac{5}{14}$ of Section $\frac{36}{16}$ Township $\frac{5}{16}$ North, Range $\frac{6}{16}$ West. Town of $\frac{6}{16}$	Legal
LAND USE X SANITARY A PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER	LAND (
Checks are made payable to: Baytield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.	Check DO N Chang
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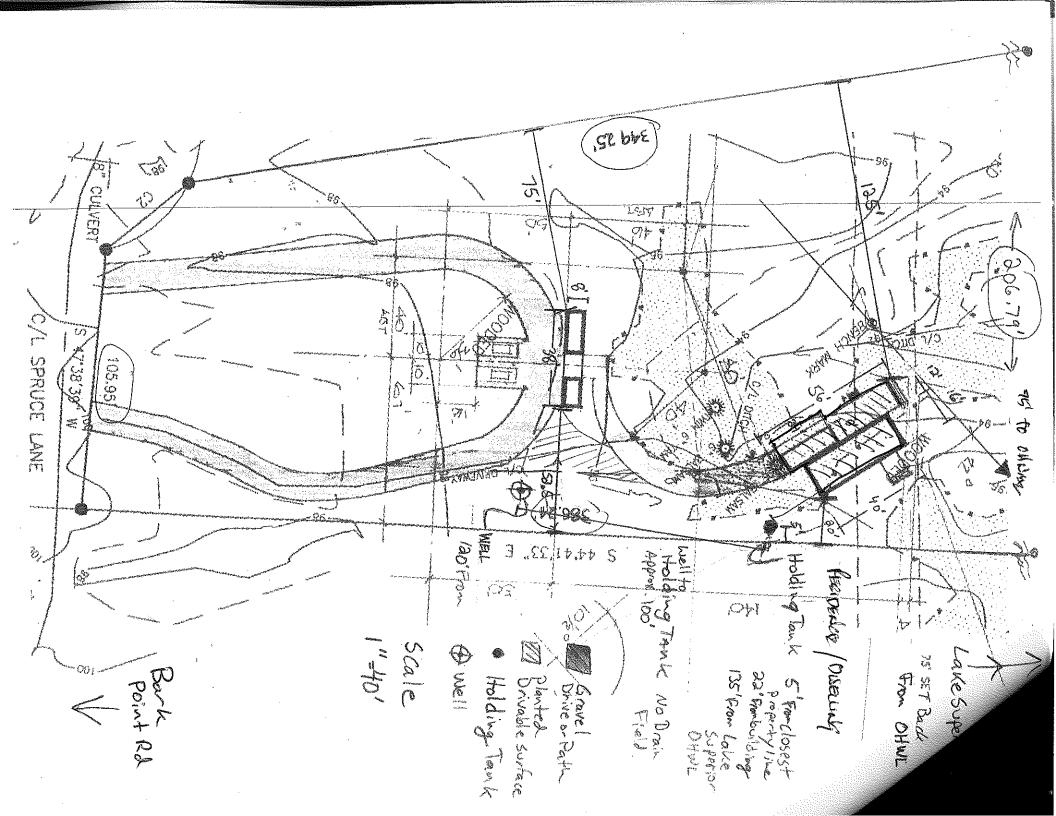
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APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

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Rec'd for Issuance Signed T-L-C Inspector Date of Approval
Mitigation Plan Required: Yes □ No 🔯 Variance (B.O.A.) # Condition:
BE 1534 By DOC Date of Inspection 7
Reason for Denial: Inspection Record: Repost Shouther wells to show to the show to the animal finance will be animal from the show the should be shown to the show the should be shown to the should be shown to the should be sh
Date 17-17-10 Permit Number 179-034 Permit Denied (Date)
Permit Issued: State Sanitary Number 12-615 Date 1-6-12-
Copy of (If you recently APPLICANT — PLEASE COMPLETE REVERSE SIDE Attach a Copy
gent (Signature) C > 1/2 4th Street Washburn WI 54891 ATTAC
OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL including any accompanying information) has been examined by me (us) and to the best of my (our) know responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied comply which may be a result of Bayfield County relying on this information I (we) am (and with administering county ordinances to have access to the above described property at any continuous control of the c
Residential Accessory Building (explain) 5000 (\$\frac{15 \text{ Februal Turk}}{2000 \text{ External Improvements to Principal Building (explain)}
ge sq. it
w/attached garage (# of bedrooms)
Residence sq. ft Porch sq. ft Deck sq. ft Deck(2) sq. ft Deck sq. ft
Residence sq. ft Commercial Principal Building
Structure: New X Addition Existing Basement: Tes No. City Fair Market Value 40,000 Square Footage 304 300 Sanitary: New X Existing Privy City USE: Type of Septic/Sanitary System Ho (ding factor) We will be the septic of Septic/Sanitary System Ho (ding factor)
noreland Zone? Yes 🔀 No 🗍 If yes. Distance from Shoreline:
13-377 (Home) 6/3 23-79 2 2 (Work)
Address of Property 89741 Beach Point Rd. Plumber Superior Plumbing & Mechanical Authorized Agent Les la Eturn (Phone) 715, 309, 0300
Contractor Lake Effect Builte Phone
Lot Block
Use Tax Statement for Legal Description Legal Description $NE_{1/4}$ of $S_{1/4}$ of Section $S_{1/4}$ Township $S_{1/4}$ North, Range OF West. Town of $S_{1/4}$ Or $S_{1/4}$ of Section $S_{1/4}$ Township $S_{1/4}$ North, Range $S_{1/4}$ West. Town of $S_{1/4}$ Or $S_{1/4}$
LAND USE 🔀 SANITARY 🗍 PRIVY 🗍 CONDITIONAL ÜSE 🗍 SPECIAL USE 🗍 B.O.A. 🗍 OTHER
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.

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